



CHANGE OF CORRESPONDENCE ADDRESS *Application*

Address to:
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| | |
|------------------------|------------------|
| Application Number | 09/921,809 |
| Filing Date | 08/03/2001 |
| First Named Inventor | Michael L. Perry |
| Art Unit | 1746 |
| Examiner Name | J. Crepeau |
| Attorney Docket Number | C-2462 |

Please change the Correspondence Address for the above-identified application to:

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|---|------------------------|-------|--------------|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Robert H. Kelly, Esq. | | | | |
| Address | UTC Fuel Cells | | | | |
| Address | 195 Governor's Highway | | | | |
| City | South Windsor | State | CT | ZIP | 06074 |
| Country | | | | | |
| Telephone | 860-727-2160 | Fax | 860-727-2399 | | |

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed
Name

M. P. Williams (Reg. No. 19,220)

Signature

Date

9/29/04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.